IN THE UNITED STATES DISTRICT COURTFOR THE DISTRICT OF SOUTH CAROLINA

Debra 1azewell	Complaint for Violation of Civil Rights
(Write the full name of each plaintiff who is filing	(Non-Prisoner Complaint)
this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)	Case No
-against-	ာ

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names. Do not include addresses here.)

NOTICE

Federal Rules of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should not contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include only: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

In order for your complaint to be filed, it must be accompanied by the filing fee or an application to proceed in *forma pauperis*.

I. The Parties to This Complaint

A. The Plaintiff(s)

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	Debra laxewell
Street Address	207King Edwards St
City and County	Darlington
State and Zip Code	SC, 29532
Telephone Number	843-639-3890

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known) and check whether you are bringing this complaint against them in their individual capacity or official capacity, or both. Attach additional pages if needed.

Defendant No. 1	1 2 01 00
Name	youngs store
Job or Title	Manager
(if known)	
Street Address	601 Man St
City and County	Darlington
State and Zip Code	SC, 29532
Telephone Number	843-393-2539
☐ Individual capa	city
Defendant No. 2	
Name	
Job or Title	
(if known)	
Street Address	
City and County	
State and Zip Code	
Butto and 2.p con-	

Telephone Number

II.

		Individual capacity	Ц	Official capacity
	Defendant	No. 3		
	Naı	me		
	Job	or Title		
	(if l	known)		
	Str	eet Address		
	Cit	y and County		
	Sta	te and Zip Code		
	Tel	ephone Number		
		Individual capacity		Official capacity
	Defendant	No. 4		
	Na	me		
	Job	o or Title		
	(if	known)		
	Str	eet Address		
	Cit	y and County		
	Sta	te and Zip Code		
	Te	lephone Number		
		Individual capacity		Official capacity
Basis	for Jurisdi	ction		
rights <i>Biven</i>	s, privileges, es v. Six Un	or immunities secured by known Named Agents of	the Const Federal B	fficials for the "deprivation of any itution and [federal laws]." Under ureau of Narcotics, 403 U.S. 388 of certain constitutional rights.
A.	Are you b	ringing suit against (check	all that ap	ply):
	□ Fe	deral officials (a <i>Bivens</i> cla	aim)	
	□ Sta	ate or local officials (a § 19	983 claim)	
B.	Section 19	983 allows claims alleging secured by the Constitut	the "deprion and [fe	ivation of any rights, privileges, or deral laws]." 42 U.S.C. § 1983. If

III.

	you are suing under section 1983, what federal constitutional or statutory right(s) do you claim is/are being violated by state or local officials?
	Plaintiffs suing under <i>Bivens</i> may only recover for the violation of certain constitutional rights. If you are suing under <i>Bivens</i> , what constitutional right(s) do you claim is/are being violated by federal officials?
	Section 1983 allows defendants to be found liable only when they have acted "under color of any statute, ordinance, regulation, custom, or usage, of any State or Territory or the District of Columbia." 42 U.S.C. § 1983. If you are suing under section 1983, explain how each defendant acted under color of state or local law. If you are suing under <i>Bivens</i> , explain how each defendant acted under color of federal law. Attach additional pages if needed.
atei	ment of Claim
rsoi rel rsoi atute	as briefly as possible the facts of your case. Describe how each defendant was nally involved in the alleged wrongful action, along with the dates and locations of evant events. You may wish to include further details such as the names of other as involved in the events giving rise to your claims. Do not cite any cases or es. If more than one claim is asserted, number each claim and write a short and statement of each claim in a separate paragraph. Attach additional pages if needed.
	Where did the events giving rise to your claim(s) occur? Lound's Store a 601 Main 8+. Dorling fon SC, 29532

n(s)? (For example: What hap) nvolved? Who else saw what hap Called a BITCH re were custom sen, One custom lady who dud r
re were custom
7,0,
lady who dud r
alleged above, describe your inju
ed and did or did not receive.

IV.

V. Relief

State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes. If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims.

Wages los	t for co	ulina ou	It do	to en	1 still	. howing
Wages los us work to do to not still was	ogether	would a	call ou	A, lost	my tr	nek -
do to not	really	working	, pain	and s	ufferi	ng.
still was	being	<u>dus respe</u>	eted a	sking	Hor \$3	<u>0.00</u> 0
	J					

VI. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where caserelated papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing: May Ind., 2023
Signature of Plaintiff Debra / ascurell
Printed Name of Plaintiff Debra 1972

В.	For Attorneys	
	Date of signing:, 20	
	Signature of Attorney	
	Printed Name of Attorney	
	Bar Number	
	Name of Law Firm	
	Address	
	Telephone Number	
	E-mail Address	